File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



## FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

RECEIVED

JAN 1 5 2009

COMMITTEE NAME (Must be same as on Statement of Organization)	7	
	FORM	
Collins for Treasurer	DD 3	
IMPORTANT: Indicate by # type of committee you are reporting for:  (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party	(Rev. 07/2007) REPORT	
1 \ 7 \County Certifal Committee ( 5 )County Candidate ( 6 \City Candidate ( 7 \Candidate ) Page = 045 = 0.000 = 1	1   '	
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue	For Office Use Only Comm. # 18/29	
CANDIDATE COMMITTEES ONLY:	Comm. #	-
Candidate Name Political Party (if applicable)	Scanned	_
G. Jo Ann Collins Republican	Computer	
Office Sought District (if Senate or House)	Audited	
Treasurer	J [	
Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) a	and 68A.401(3), the candidate, for a	
La Collina 515 1102 2000	1 111 200	
SIGNATURE OF PERSON FILING REPORT  515-462-3998  TELEPHONE	<u> </u>	
, TELEPHONE	DATE SIGNED	
I AM FILING A January 19, 209 REPORT FOR (1) ELECTION /(2)	NON-ELECTION VEAD	
(report date) Indicate by #	-	
☐CHECK IF AMENDMENT TO REPORT DATED		
Loca	cal Committees, enter Date of Election	
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.	11-4-2008	
(You must continue to file reports until a DR-3 is filed )	unty & Local Committees, enter County in ch Election iş held	ļ
	100 - 01 -	
	Madison	
STATEMENT OF CASH ON HAND	Modison	
	11/00/150M	
STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)		
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For Instructions, See Back of Form	SCHEDULE	
CONTRIBUTIONS - MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 06/97)	MCNETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF

Collins	for 1	reasurer	•			
TATE CANDIDATES NOTE: IUMBER AND THE PAC CHECK	IF A CONTRIBU NUMBER IN TH	ITION IS RECEIVED FROM A IE DESIGNATED COLUMN. A	STATE PAC (POLITICAL ACT LIST OF ID NUMBERS IS AV	TON COMMITTEE), L 'AILABLE FROM THE	IST THE PAC IDENTIFICATION IN THE PACTION IN THE PAC IDENTIFICATION IN THE PACTION IN T	TION PAIGN

DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF THE PARTY O	-		
RECEIVED	(if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FO
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)	HECEIVED	FUND- RAISER
}	ID#	l n Clli			INCOME
11/2		JOHAN Collins		\$ 1	
11/26/08	CK#	JoAnn Collins 203 E Lane Winterson In 50273	Self	\$100,00	
	ID#	Winterson and July 13			
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	ID#		· · · · · · · · · · · · · · · · · · ·		
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			SUB-TOTAL		

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

TOTAL (if last page of this

schedule)

AMENDING FORM

FOR II	NSTRUC	CTIONS.	SEE BA	ACK (	OF I	FORM
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## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTE	E NAME (Must be :	same as on Statement of Organization)		
Coll	ins for	Treasurer		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/26/08	ID# CK#	State of Jowa IA Ethics & Campaign Disclosure DM IA 50319	Civil Penalty due to lete uport filing	\$50,00
	ID#			
	ID# CK#			
	ID#			
	ID#			
	ID# CK#		NI-1/14-1	
	ID#			
	ID# CK#		444	
	terren erren e		SUB-TOTAL  TOTAL (if last page of this schedule)	\$ \$ 50,00

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

		1		1	
Page	-		of	4	